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Docket No.: 50198-109

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

David PASCUAL et al

Serial No.: 09/068,935

Group Art Unit:

Filed: May 21, 1998

Examiner:

For: THERAPEUTIC AND DIAGNOSTIC AGENTS FOR THE TREATMENT OF
MICROBIAL INFECTIONS

TRANSMITTAL OF VERIFIED STATEMENT
CLAIMING SMALL ENTITY STATUS

Honorable Commissioner of
Patents and Trademarks
Washington, DC 20231

Sir:

Transmitted herewith for filing in the above referenced application is the following:

VERITIFIED STATEMENT CLAIMING SMALL ENTITY STATUS –

NON-PROFIT ORGANIZATION

Respectfully submitted,

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Applicant or Patentee: David Pascual et al.Serial or Patent No.: 09/068,935Filed or Issued: May 21, 1998For: THERAPEUTIC AND DIAGNOSTIC AGENTS FOR THE TREATMENT OF MICROBIAL INFECTIONS

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) and 1.27(d)) - NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: THE RESEARCH AND DEVELOPMENT INSTITUTE, INC.ADDRESS OF ORGANIZATION: 1711 West College, Montana State University, Bozeman, MT 59715

TYPE OF ORGANIZATION:

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
- ☒ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) AND 501(c)(3))
- ☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
- (Name of State: _____)
- (Citation of Statute: _____)
- ☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA
- ☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
- (Name of State: _____)
- (Citation of Statute: _____)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled by inventor(s) THERAPEUTIC AND DIAGNOSTIC AGENTS FOR THE TREATMENT OF MICROBIAL INFECTIONS described in

- ☐ the specification filed herewith
- ☒ application Serial No. 09/068,935, filed MAY 21, 1998.
- ☐ patent no. , issued .

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or by a nonprofit organization under 37 CFR 1.9(e). *NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention availing to their status as small entities. (37 CFR 1.27)

NAME Ligocyte Pharmaceuticals, Inc.ADDRESS 920 Technology Blvd., Suite C., Bozeman, MT 59718☐ INDIVIDUAL☒ SMALL BUSINESS CONCERN☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Roger N. FlairTITLE IN ORGANIZATION: PresidentADDRESS OF PERSON SIGNING: 1711 West College, Montana State University, Bozeman, MT 59715

SIGNATURE: _____

DATE: 11/14/98